24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
VOTE 2 REDUCE DEBT (V2RD)		
	C C00563064	
Check if 24-hour report		
Full Name of Payee	Date of Public Distribution/Dissemination	
ccAdvertising	M M / D D / Y Y Y Y	
Mailing Address 14001C Saint German Dr	08 24 2014	
Ste 353	Amount	
City State Zip Code	30928.58	
Centerville VA 20121	Transaction ID : SE.4554 Date of Disbursement or Obligation	
Purpose of Expenditure Voter ID Call Centers Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office	e Sought: House District:	
THOM R TILLIS Oppose	President Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary X General Other (specify) ▶	
Full Name of Payee ccAdvertising	Date of Public Distribution/Dissemination	
	08 24 2014	
Mailing Address 14001C Saint German Dr	Amount	
Ste 353		
City State Zip Code	1071.42	
Centerville VA 20121	Transaction ID : SE.4553 Date of Disbursement or Obligation	
Purpose of Expenditure Voter ID Call Centers Category/ Type	08	
Name of Federal Candidate Support Offic	e Sought: House District:	
THOM R TILLIS Oppose	President State: NC State:	
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary	
(a) SUBTOTAL of Itemized Independent Expenditures	32000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
STEVE REITER [Electronically Filed] Date	08 26 2014	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	TILS	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
VOTE 2 REDUCE DEBT (V2RD)		C C00563064
Check if 24-hour report 48-hour report New report	Amends report filed or	M = M / D = D / Y = Y = Y
Full Name of Payee Empire Building LLC	С	Date of Public Distribution/Dissemination
Mailing Address PO Box 8050		08 24 2014
		Amount
	Code	2047.12
Greensboro NC 27		Transaction ID: SE.4561 Date of Disbursement or Obligation
Purpose of Expenditure Office Space Rental	ategory/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Office S	ought: House District:
THOM R TILLIS		resident Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 479	Disburse 2014	ement For: Primary X General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Matt Mercer		08 24 2014
Mailing Address PO Box 612	A	Amount
City State Zip	Code	15000.00
Madison NC 27		ransaction ID : SE.4550 Date of Disbursement or Obligation
Purpose of Expenditure Contract Labor for State Election Consulting	ategory/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	X Support Office S	Sought: House District:
THOM R TILLIS		resident State: NC
Calendar Year-To-Date Per Election for Office Sought	15000.00 Disburse 2014	ement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	······	17047.12
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures repwith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
STEVE REITER [Electronicals Signature]	ly Filed] Date 08	26 2014
- J		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
VOTE 2 REDUCE DEBT (V2RD)	C C00563064	
Check if 24-hour report X 48-hour report New report Amends report filed or	n M M / D D / Y Y Y Y Y	
	Date of Public Distribution/Dissemination	
Matt Mercer	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 612	Amount	
City State Zip Code	7500.00	
Madison NC 27025	Transaction ID : SE.4551 Date of Disbursement or Obligation	
Purpose of Expenditure Contract Labor for State Election Consulting Category/ Type	08 / 02 / 2014	
Name of Federal Candidate Support Office S	Sought: House District:	
THOM B TILLIS	resident State: NC	
Calendar Year-To-Date Per Election for Office Sought Disburse 2014	ement For:	
	Date of Public Distribution/Dissemination	
The Political Network	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 225 East 85th St	Amount	
Ste 306		
City State Zip Code New York NY 10028 Tr	4503.51 ransaction ID : SE.4552	
Purpose of Expenditure	Date of Disbursement or Obligation	
Telecommunications Equipment Rental Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support Office S	Sought: House District:	
THOM R TILLIS Oppose P	President Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought Disburs: 2014	ement For: Primary	
(a) SUBTOTAL of Itemized Independent Expenditures	12003.51	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7	
(c) TOTAL Independent Expenditures	61050.63	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
STEVE REITER [Electronically Filed] Date 08	26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		